



COLUMBIA COUNTY
FIRE MARSHAL'S OFFICE
630 Ronald Reagan DR Bldg. A
EVANS, GA 30809

Phone: 706-868-3420/Fax: 706-868-3381

www.columbiacountyga.gov

354S Fire Suppression System Transmittal Letter

(To be submitted by Georgia Licensed Fire Sprinkler Contractor C of C printed name, Georgia CL# and original signature must be on sprinkler shop drawings)

Please FILL OUT the following COMPLETELY:

DATE: _____

TYPE OF PLANS: ☐ SPRINKLER ☐ OTHER

☐ EXISTING ☐ NEW

Facility Name: _____ **Phone:** _____

Project Name: _____

Street Address (physical location): _____

City: _____ **County:** _____ **Zip:** _____

TYPE OF OCCUPANCY (PER NFPA 101 – LIFE SAFETY CODE):

<input type="checkbox"/> ASSEMBLY	<input type="checkbox"/> AMBULATORY HEALTH	<input type="checkbox"/> COLLEGE	<input type="checkbox"/> DAY CARE
<input type="checkbox"/> EDUCATION	<input type="checkbox"/> HOSPITAL	<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> INSTITUTION
<input type="checkbox"/> MERCANTILE	<input type="checkbox"/> NURSING HOME	<input type="checkbox"/> OFFICE	<input type="checkbox"/> PERSONAL CARE
<input type="checkbox"/> RACE TRACK	<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> STORAGE	

Owner: _____ **Phone:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Contact Person: _____ **Phone:** _____

SPRINKLER COMPANY _____ **Phone:** _____

C of C Name: _____ **C of C Number:** _____

Designer Name: _____ **Designer Number:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Contact Person: _____ **Phone:** _____

Email: _____

PLEASE SUBMIT 2 SETS OF PLANS, 2 SETS OF HYDRAULIC CALC'S, 1 SET OF MANUFACTURER DATA:

If approved Columbia County will keep one set of plans and hydraulic calc's. Approved sets to be picked up at address above.

PURPOSE OF SUBMISSION:

☐ REVIEW/APPROVAL ☐ RESUBMISSION ☐ INFORMATION ☐ COURTESY

PROJECT INFORMATION

TYPE OF SPRINKLER SYSTEM: ☐ NFPA 13 ☐ NFPA 13R

SQUARE FEET: _____ **ESTIMATED COST:** _____

TOTAL STORIES OF BUILDING: _____ **IS THERE A BASEMENT?** ☐ YES ☐ NO

NUMBER OF SPRINKLERS: _____ **ESTIMATED PROJECT COMPLETION DATE:** _____

AMOUNT OF REVIEW FEE INCLUDED: \$ _____ **(IN ACCORDANCE WITH ARTICLE 25-2-4 OF O.C.G.A TITLE 25)**

(Review + Inspection = \$200.00)

Note: All checks to be made payable to "Columbia County"